

=== COVER PAGE ===

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TO: \_\_\_\_\_

FROM: REED SMITH LLP

FAX: 7032041352

TEL: 7036414547

COMMENT: CONFIDENTIAL

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**JUL 20 2006**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

**In re U.S. Patent Application of**

SATO et al.

**Application Number: 09/940,663**

**Filed: August 29, 2001**

**For: STORAGE MEDIA STORING DATA RELATED  
TO SMART CARD, SMART CARD SYSTEM AND  
SMART CARD APPLICATION LOADING METHOD**

**Attorney Docket No. NITT.0031**

**Commissioner of Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450**

) Art Unit 2191

Examiner Steelman, Mary J.

) **Факс No. 571-273-8300**

## COVER LETTER

Sir,

**[ x ] The fee for submission of claims is calculated as shown below:**

FOR	TOTAL WITH NEW CLAIMS ADDED	TOTAL CURRENTLY ON FILE	CLAIMS ALREADY PAID	RATE	CALCULATION
Total Claims	9	9	(Over 20)	x \$50	0
Independent Claims	3	3	(Over 3)	x \$200	
MULTIPLE DEPENDENT CLAIM(S)				+ \$360	0
REDUCTION FOR FILING BY SMALL ENTITY (note 37 C.F.R. §§ 1.9, 1.27, 1.28). IF APPLICABLE, VERIFIED STATEMENT MUST BE ATTACHED				x ½	
			TOTAL		

In addition, the below-identified communications are submitted in the above-captioned application or proceeding:

<input checked="" type="checkbox"/> Supplemental Response to Notice of Non-Compliant Amendment(w/ Claim Amendments)	<input type="checkbox"/> Petition for Extension of Time ( _ month)
<input type="checkbox"/> Preliminary Amendment	<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> Substitute Specification	<input type="checkbox"/> Letter to Draftsperson
<input type="checkbox"/> Other _____	<input type="checkbox"/> _____ sheet of drawings
	<input type="checkbox"/> Request for Continued Examination

- ☐ Please charge my Deposit Account Number \_\_\_\_\_ in the amount of \_\_\_\_\_ to cover the fees for \_\_\_\_\_. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$ \_\_\_\_\_ to cover the fee is enclosed.
- ☒ The Commissioner is hereby authorized to charge any additional fees associated with this communication, or credit any overpayment to Deposit Account Number 08-1480.

Respectfully submitted,

\_\_\_\_\_  
Stanley P. Fisher  
Registration Number 24,344

  
\_\_\_\_\_  
Juan Carlos A. Marquez  
Registration Number 34,072

**REED SMITH LLP**  
3110 Fairview Park Drive, Suite 1400  
Falls Church, Virginia 22042  
(703) 641-4200  
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REDUCTION FOR FILING BY SMALL ENTITY (note 37 C.F.R. §§ 1.9, 1.27, 1.28). IF APPLICABLE, VERIFIED STATEMENT MUST BE ATTACHED				x 1/4	
				<b>TOTAL</b>	

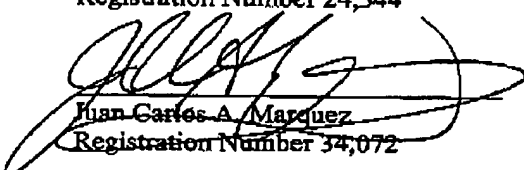
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**SUPPLEMENTAL RESPONSE**

**TO NOTICE OF NON-COMPLAINT AMENDMENT**

Sir:

Please amend the claims in the response to Notice of Non-Compliant Amendment submitted April 28, 2006, as follows: